

# CLAIMS ONLY

Application Number

091633869

Filing Date

Applicant(s)

May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	/												
2	/												
3	/												
4	/												
5	/												
6	/												
7	/												
8	/												
9	/												
10	/												
11	/												
12	/												
13	/												
14	/												
15	/												
16	/												
17	/												
18	/												
19	/												
20	/												
21	/												
22	/												
23	/												
24	/												
25	/												
26	/												
27	/												
28	/												
29	/												
30	/												
31	/												
32	/												
33	/												
34	/												
35	/												
36	/												
37	/												
38	/												
39	/												
40	/												
41	/												
42	/												
43	/												
44	/												
45	/												
46	/												
47	/												
48	/												
49	/												
50	/												
Total													
Indep	6												
Total													
Depend	15												
Total													
Claims	21												
	39												
	60												
	61												
	62												
	63												
	64												
	65												
	66												
	67												
	68												
	69												
	70												
	71												
	72												
	73												
	74												
	75												
	76												
	77												
	78												
	79												
	80												
	81												
	82												
	83												
	84												
	85												
	86												
	87												
	88												
	89												
	90												
	91												
	92												
	93												
	94												
	95												
	96												
	97												
	98												
	99												
	100												
Total													
Indep	2												
Total													
Depend	37												
Total													
Claims	39												

	Indep	Depend	Indep	Depend	Indep	Depend
51	/					
52	/					
53	/					
54	/					
55	/					
56	/					
57	/					
58	/					
59	/					
60	/					
61	/					
62	/					
63	/					
64	/					
65	/					
66	/					
67	/					
68	/					
69	/					
70	/					
71	/					
72	/					
73	/					
74	/					
75	/					
76	/					
77	/					
78	/					
79	/					
80	/					
81	/					
82	/					
83	/					
84	/					
85	/					
86	/					
87	/					
88	/					
89	/					
90	/					
91	/					
92	/					
93	/					
94	/					
95	/					
96	/					
97	/					
98	/					
99	/					
100	/					
Total						
Indep	2					
Total						
Depend	37					
Total						
Claims	39					

New